



APPOINTMENT OF AGENT

O W N E R	Full Legal Name of Owner			
	Mailing Address	City	State	Zip Code
	Physical Address	City	State	Zip Code
	Contact Person and Title _____ Telephone Number () -			
P R O P E R T Y	<input type="checkbox"/> All property listed for this owner in San Bernardino County <input type="checkbox"/> All Real property listed for this owner in San Bernardino County <input type="checkbox"/> All Business and Personal Property listed for this owner in San Bernardino County <input type="checkbox"/> Other: _____ _____			
	<input type="checkbox"/> General power to represent the owner in property tax matters concerning this property. <input type="checkbox"/> The Agent has specific powers listed below: <input type="checkbox"/> Filing of Assessor's forms <input type="checkbox"/> File Assessment Appeal applications and represent owner at appeal hearings for the assessment year: _____ (please indicate year to be appealed) and to provide me a copy of the assessment appeal application filed on my behalf. <input type="checkbox"/> Receive confidential information <input type="checkbox"/> Negotiate and resolve assessment matters <input type="checkbox"/> Change mailing address of all my property tax notices and other communications for this property, including appraisal notices, appraisal review board orders and hearing notices, tax bills, and collection notices Note: These notices can affect your legal rights. The affected offices are not required by law to send you duplicate copies. <input type="checkbox"/> Other: _____			
	Agent's Name:			
	Mailing Address	City	State	Zip Code
A G E N T	Physical Address	City	State	Zip Code
	Contact Person and Title _____ Telephone Number () -			

Authorization

 Signature of Owner, a partner, or LLC Manager/Corporation Officer whom the Board of Directors has designated in writing to sign on behalf of the Corporation.

 Date

 Please print the Name and Title of the person above.